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TELECOPY COVER SHEET

Equipment Operator Contact Number: 617-248-7462. Please call if you do not receive all the pages.

Date: May 21, 1999

TO: **Name:** Examiner Titcomb
Company: U.S. Patent and Trademark Office
Address:
Telephone:
Fax: (703) 305-7201

FROM: **Sender:** Michael A. Rodriguez
Sender's Direct Dial: (617) 248-7501
Number of Pages INCLUDING This Cover Sheet: 14
Client: 2115/4 (EPC-002)

Comments:

570MAR9901/570.677313-1

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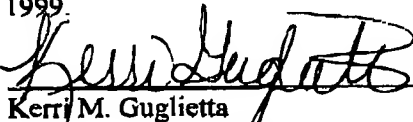
PATENT
Attorney Docket No. EPC-002
(2115/4)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Kobata
SERIAL NO.: 08/801,458 GROUP NO.: 2757
FILING DATE: February 18, 1997 EXAMINER: Titcomb, W.
TITLE: MARKETING DATA DELIVERY SYSTEM

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any documents referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 305-7201 on this 21st day of May, 1999.


Kerri M. Guglietta

Attached hereto is:

Continued Prosecution Application (CPA) Request Transmittal (2 pages);
Fee Transmittal (1 page); and
Preliminary Amendment (9 pages).

570MAR2115/4.A783332-1

FEE TRANSMITTAL

*Note: Effective October 1, 1997,
Patent fees are subject to annual revision*

Comple **Known**

Application Serial Number	08/801,458
Filing Date	February 18, 1997
First Named Inventor	Kobata
Group Art Unit	2757
Examiner Name	Titcomb, W.
Attorney Docket No.	EPC-002 (2115/4)

METHOD OF PAYMENT

1. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other
2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below to Deposit Account No. 20-0531.
- ☒ Required Fees (copy of this sheet enclosed).
- ☐ Additional fee required under 37 CFR 1.16 and 1.17.
- ☒ Overpayment Credit.

FEE CALCULATION**1. FILING FEE**

Large Entity Fee (\$)	Fee Description	Fee Paid
760	Utility filing fee	760.00
310	Design filing fee	
150	Provisional filing fee	

	Number Filed	Number Extra	Rate	Amount
Total Claims	22	- 20 = 2	x \$ 18.00 =	36.00
Independent Claims	3	- 3 = 0	x \$ 78.00 =	0

☐ Multiple Dependent Claim(s), if any \$260.00 =

TOTAL: 796.00

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$) 796.00

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	-	x \$ 18.00 =	
Indep.	-	-	x \$ 78.00 =	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$260.00 =	
TOTAL:				(\$)
SMALL ENTITY DISCOUNT:				(\$)
SUBTOTAL (2)				(\$)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or	
130	130	Non-English specification	
2,520	2,520	For filing a request for reexamination	
110	55	Extension for reply within first month	
380	190	Extension for reply within second month	
870	435	Extension for reply within third month	
1,360	680	Extension for reply within fourth month	
1,850	925	Extension for reply within fifth month	
300	150	Notice of Appeal	
300	150	Filing a brief in support of an appeal	
260	130	Request for oral hearing	
130	130	Petitions to the Commissioner	
50	50	Petitions related to provisional applications	
240	240	Submission of Information Disclosure Statement (37 CFR 1.97(c))	
130	130	Submission of Information Disclosure Statement (37 CFR 1.97(d))	
760	380	Filing a submission after final rejection (37 CFR 1.129(a))	
760	380	For each additional invention to be examined (37 CFR 1.129(b))	
		Other (Specify)	

SUBTOTAL (3) (\$)

SUBTOTAL (1) 796.00

SUBTOTAL (2)

SUBTOTAL (3)

TOTAL (\$) 796.00

CORRESPONDENCE ADDRESS

Direct all correspondence to:

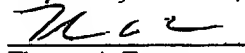
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SIGNATURE BLOCK

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Respectfully submitted,


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